As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled PHONE CRADIE WITH AN ADJUSTABLE PLUG-IN ADAPTER _____, the specification of which (check one) x is attached hereto. was filed on. Application Serial No. and was amended on . (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Post Office Address

			Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed)	- Ves No
(Number)	(Country)	(Day/Month/Year Filed)	Yes No
(Number)	(Country)	(Day/Month/Year Filed)	Yes No
I hereby claim the benefit und the subject matter of each of the vided by the first paragraph of	he claims of this application is not d Title 35, United States Code, §112, l egulations, §1.56(a) which occurred	O of any United States application(s) isclosed in the prior United States ap acknowledge the duty to disclose ma between the filing date of the prior	pplication in the manner protection as define
(Application Serial No.)	(Filing Date)	(Status—pai	tented, pending, abandoned
(Application Serial No.)	(Filing Date)	(Status—pat	ented, pending, abandoned
Address all telephone calls to			
Address all correspondence to	EZRA SUTTO	N, P.A.	2) 634-3520
Address all correspondence to	EZRA SUTTO Plaza 9, 90	N, P.A.	2) 634-3520
I hereby declare that all statem belief are believed to be true; a like so made are punishable by	EZRA SUTTO Plaza 9, 90 Woodbridge, ments made herein of my own know and further that these statements we refine or imprisonment, or both, un	N, P.A.	ts made on information an Iful false statements and the
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206 West Shearwater Court

Port Liberte, New Jersey 07305